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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) <b>608352000101</b>	
Application Number <b>10/594,851</b>	Filed <b>April 1, 2005 (Int'l.)</b>		
For <b>ASSAY FOR IDENTIFYING COMPOUNDS WHICH AFFECT STABILITY OF mRNA</b>			
Art Unit <b>1636</b>	Examiner <b>C. Hibbert</b>		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	<b>Fee \$150</b>	<b>Small Entity Fee \$75</b>	<b>\$ 75.00</b>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	<b>\$560</b>	<b>\$280</b>	<b>\$</b>
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	<b>\$1270</b>	<b>\$635</b>	<b>\$</b>
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	<b>\$1980</b>	<b>\$990</b>	<b>\$</b>
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	<b>\$2690</b>	<b>\$1345</b>	<b>\$</b>
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u> .			
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>			
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>64,063</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 <u>                  </u>			
<u>/Eva Hannak/ Signature</u>		<u>January 12, 2012 Date</u>	
<u>Eva Hannak Typed or printed name</u>		<u>(650) 813-5726 Telephone Number</u>	
<small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small>			
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.			